



Study Resolution

Reducing unnecessary emergency department utilization

Authorized by the Joint Commission on Healthcare on December 7, 2021

WHEREAS, literature reviews and cost-of-care comparative analyses continually show that the emergency department (ED) is the most expensive location of care in the United States healthcare system; and

WHEREAS, national data indicate that ED visits are more than six times more expensive than primary care visits for the same conditions; and

WHEREAS, a national analysis of claims found 30 percent of ED visits could have been treated in a lower cost primary care or other ambulatory setting; and

WHEREAS, studies indicate that unnecessary ED use is often due to either a lack of access to, or patient awareness of more appropriate settings; and

WHEREAS, there continues to be an increase in the construction of hospital based free standing EDs in Virginia; and

WHEREAS, unnecessary ED utilization and the associated costs of those visits may be contributing to increasing healthcare costs in Virginia; and

WHEREAS, multiple legislatively directed studies and policy actions by the General Assembly continue to examine unnecessary ED use in Virginia, including allowing the state to reduce Medicaid payments for ED services later deemed unnecessary, now, therefore be it

RESOLVED, by the Joint Commission on Health Care that staff be directed to study unnecessary ED utilization in Virginia.

In conducting its study, staff shall (i) review recent trends in emergency department utilization in Virginia, including the types and severity of conditions commonly treated in emergency departments; (ii) assess how health insurance coverage and access to primary care impact emergency department utilization; (iii) assess the impact of the location of free standing emergency departments on utilization, cost and access to care; and (iv) identify options the General Assembly can pursue, including community-based programs and regulatory changes, to ensure Virginians can be treated in lower cost, primary care, and other preventive settings when appropriate to reduce unnecessary use of emergency departments.

The Joint Commission on Health Care shall make recommendations as necessary and review other related issues as warranted.

In accordance with § 30-169.1 of the Code of Virginia, all agencies of the Commonwealth, including the Virginia Department of Health, Virginia Health Information (VHI) and the

Virginia Department of Medical Assistance Services shall provide assistance, information, and data to the JCHC for this study upon request.